File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319

Reset Form

		LH LISCLOS	
DISCLOSURE SUMMARY PAGE	20 00 00	CT21 AHI	n: n ז
COMMITTEE NAME (Must be same as on Statement of Organization)	_		
Citizens to Re- elect Rowland		FORM DR-2	
IMPORTANT: Indicate by # type of committee you are reporting for: 5 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC		Rev. 07/2007)	DISCLOSURE REPORT
-) Tool Carlot Idou		or Office Use On omm #	
CANDIDATE COMMITTEES ONLY: Candidate Name			
V(, V: T 2 (rapplicable)			
JUN BETT	C	omputer	
Office Sought Faycile County Supervisor District (if Senate or House)	A	udited	
Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A	(7) and 68		
SIGNATURE OF PERSON FILING REPORT TELEPHONE		10/15/2	
		DATE SI	
AM FILING A October 14th 2003 REPORT FOR (1) ELECTION	(2)NON-	FI FCTION YEA	.p
(report date) Indicate by #			ux.
CHECK IF AMENDMENT TO REPORT DATED			
1	ocal Com	mittees, enter Date	e of Election
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.)	County & Lo which Elect	ocal Committees, ion is held	enter County in
STATEMENT OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end	¢		93.51
CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)	\$		93.51
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CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule H applies to Candidates' Committees Only) SUB-TOTAL SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) Schedule F: Loan Repayments total (Attach Schedule F)	\$		1600-
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CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule H applies to Candidates' Committees Only) SUB-TOTAL SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) Schedule F: Loan Repayments total (Attach Schedule F) CASH ON HAND at the end of this reporting period (if final report balance must be zero)	\$		1600- -0- 1600 984.99 -0- 808.52
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CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)	(Nev. 07/03)	RECEIP 15
COMMITTEE NAME (Must be same as on Statement of Organization) Citizens To RE-ELECT ROWLAND	_	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT	√ IF FOF
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)	RECEIVED	FUND- RAISEF INCOME
67 /22/03		DR Rondld Myron 348.5. Vine St		¢ 1	
	CK#	348.5. Vine 54		\$ 100-	
2814108	ID#	Dale Minger 1		 	
	CK#	Po. Box 44' Wadenc, DA 52169		20=	
18/12/03	ID#	Roger Boleyn			
	CK#	TOI MAIN STREET Elgin, IA 52141		202	f L
12/08	ID#	Dennis Bond	Cousin	500	
	CK#	West YNZON AM	COUST	7=	
8/27/08	ID#	Duche and Delprice Branch			
- -	CK#	Delver De Socoz		25=	L
07/25/08	ID#	NOEL AND DEB KNIGHT	2 mc Cousm	_	
	CK#	400 m ELC ST. Elgm, TA 52141	1 - 6043.	10000	
9/3/08	ID#	GARY H Karen Helva			
71703	CK#	West UNION 1452175		600	
9/3	ID#	Lloyd H. + Abeline meger			
717	CK#	P.O BOK 167 Clermont TA 52135-0167		2000	
Class	ID#	mas Anna 11) eaco			
913600	CK#	1189 Filmore RE Elgin, 14 52141		200	
913/09	ID#	Bhoulic Caballero			
,[02	CK#	BOX 273 Favette, IA SZ14Z		255	<u> </u>
			SUB-TOTAL	\$3750	///
		TOTAL (if last page	of this schedule)	• • • •	
Disclosure law req	uires candidate committee	es to disclose the relationship of any relative making a contribution	· •	\$	

committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

SCHEDULE

MONETARY

Reset Form

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZENS TO 'RE-ELECT ROWLAND

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)	INCOLIVED	RAISER
9/03/03		Juzenne Sharp Johnson		\$ 0	
	CK#	Uelwein, IA SUGGZ		259	
09 103 (08	ID#	Keith and Kelli Kovarik			
, ,	CK#	Howkeye IA 52147		25=	
09/03/08	ID#	Coyl and FRANCES M BOWde			
	CK#	West Union, IA 52175		400=	
८० । १०९	ID#	ma mas Lovern Alexa			
	CK#	408 EAST Arum West. UNEDN 52175		2000	
09/10/03	ID#	GERALO E. BOND	Cousin		
	CK#	Box 64 Wedene, IA 52169-0064	4 5 6 6 7 7	520	
09/10/03	ID#	MRSten Evely 2400 12th Avest			
	CK#	Delwein, JA 50662-2625		25-	
80)01/PC	ID#	Steve+ Marson Milder			
,,,,	CK#	353 2 ud EAST \$ Maynerd, IA 50655		282	
09/10/02	ID#	Jim Murphy			
	CK#	430 Linden St. West UNION, IA 52/75-140	2	255	
09/10/02	ID#	Elorne Keciks			
	CK#	BOX642 Fayalle, IA SZIYZ		525	
09/10/02	ID#	G.W BOND	Coustn		
	CK#	Boraz Wedene, IA 5269	Consider	50=	
			SUB-TOTAL	s 285 9	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 2 (for Schedule A)

TOTAL (if last page of this schedule)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZENS TO RE-ELECT . ROWLAND

SCHEDULE
A MONETARY RECEIPTS

CHECK THIS BOX IF AMENDING FORM

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF COMPANY	~		
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
09/10/09	ID#	Mary Beth Ziegler			INCOME
	CK#	7056 Eagle Rd Clermont, IA 52135		3500	L
09668	ID#	Jonet Stah C			
	CK#	West 4 NION IA 52175		10000	L
09/16/03	CK#	Jim on Educ Boelman 128 Adoms St		1800	
scar d -	ID#	West UNION ITA SCITS			
69/16/08	CK#	Susca Kikirby BOY 363 West UNION, IA \$ZI75		20=	
9/16/03	ID#	Ruth E Kenney	GROW ANGT		
116 102	CK#	JUS South Pine West UNDON, IA 52175		255	
9/17/03	ID# CK#	1306 and Mardene Gages 609 Huriso Forth		772	
	ID#	West UNION, JA 52175		2>-	L
9/17/02	CK#	Donne Metherd 404 MELL ST		233	
09/17/02	ID#	Chery Treathe			
	CK#	19665 AUG 52147	·	25=	
09/17/03	ID# CK#	Steveral Donne Sturt 18883 205th Stock		5~-	
	ID#	Howkeye, IA 52147		70 4	
मानान	CK#	Artine Bourson BOX103 CLERMON J. JH 52135		30=	
			SUB-TOTAL	\$365≌	1/
		TOTAL (if last page	of this schedule)	, , , ,	

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumarme of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 5
(for Schedule A)

For	Instruc	tions	See	Rack	of Form
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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZEN \$ TO RE-ELECT RUWLAND

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
20 31 10	ID# CK#	Donold and MARSHA LEAH? 212 EAST ELM ST WEST UNDOW, IA 52175		\$ H 09	0
व्यान्न	ID# CK#	Dunisond Carus Reur 200 MADESON ST. Clermon, IA 52135		7000	
0418(oe	ID# CK#	54 von Taylor BOX 266 Clermont, IA 52135		25=	
09/19/05	ID# CK#	IRIS AND GEURGE WOODWARD BOX 326 WEST UNION, IA 5275	0	25=	
20) 11/19	ID# CK#	Roger Boleyn normainst Eigm, IA, 52141		250=	
०९/19/02	CK#	DICK WOODARD 335 South Vine Street West UNION IA 52175		25%	
8¶(29 (os	ID# CK#	MR EQU CORLORAN JR 1308 W:110 - RE Fornbenk, TA 50629-1566		30=	
100663	ID# CK#	Howard and Rosle BIRO 15 7th Ave SE Delwern, IA 50662		25=	
(olo6(o2	ID# CK#	LORIS and Kent McElvania 111 Lineson Darse Wost un Don , DA 82175		10-	
19(06(02	ID# CK#	Druk Grehom 225 South WALNUT WEST UNION, IA 52175		25=	
			SUB-TOTAL	\$ 250 - s	/

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 4 of 5 (for Schedule A)

SCHEDULE

(Rev. 07/03)

MONETARY

RECEIPTS

Reset Form

For Instructions, See Back of Form		SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	Reset Form	A (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) CITTIZENS TO VE-ELECT ROULAND			CK THIS BOX IF NDING FORM

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
N/13/03	ID# CK#	GERALD BUNE 119 112 SOUTH UINC WEST UN ION TA 52175		\$75=	
1013(08	CK# 1020	UBST UN ION TA 52175 UNITED STAFF UNION OF LOWE, 4326 NW 2ND AND OCS MOINES, ITA 5035 2	Olitical Acom	250-	
	ID# CK#				
7.00	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#	· .			
		TOTAL (if last page	SUB-TOTAL	\$325-	4

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Page 5 of 5 (for Schedule A)

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

B MONETARY
(Rev. 07/03) EXPENDITURES

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

CITTZENS TO REFER ROLL &

0 - 1	zens to	KE-FLECT LOC	ے میا در	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
20/25/03	ID# CK# (0 \$	Aq Venture of Time 22528 Canon Rd. Elgin JA 52141	Copy Paper	\$ 5 0.39
86/11/88	,,,	Rite Porce Office Supply 214 S. Frederick Delucinith 50662.20	MARL SUPPLIES Peper + ENU.	38.56
68/u/68	ID# CK# 132	U.S. Postmoster MELL ST Germont, IA 32135	5+cmps	42.00
oblizbe	ID# CK#133	NE. III Coop BOTMill St. Clepmont, IIA 52135	PART Fu. Signs	41.71
08/22/08	CK# 134	H+H food 304 Southu INE West Unton A 52175	Cendy for Parade	13.96
09/19/25	CK# 135	U.S. Postmoster MILL ST Clernal-TA 52135	Stemps	caps
16/०८(०८	ID# CK#	Deb Farn, WT 400 MELLET Elem IA \$2,141	INK for Printer	3849
10/7/08	ID# CK# 3 6	Newspapers MtaxeHela BOX97 Elgin IA SZIYI	o, Ad. Fu. Elga Etho	40.13

SUB-TOTAL

TOTAL (if last page of this schedule)

\$ 349.24

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

	1		_
Page	1	of	2

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

B
(Rev. 07/03)

CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) Kowlond CITIZENS RE-ELECT CANDIDATE NAME AND ADDRESS TO WHOM **PURPOSE AMOUNT** DATE **ID NUMBER EXPENDITURE** (DESCRIBE TRANSACTION) **EXPENDED EXPENDED** (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# U.S. Postmoster 9/23/08 Steamps MELLST CK# 137 Fayetle Co. UNION ID# 10/11/03 119 SOUTHUME CK# West Union, IA SZI7S ID# Elgin Store Bank 08/29/68 SALES TAK WN ,05 804235 CK# BANKING Elgm, IA 52141 ID# Ekin State BANK SERVICE Chery ON 63/19/08 .70 804235 CK# BANKEN L E19m 24 52141 ID# CK# ID# CK# ID# CK# ID# CK# SUB-TOTAL

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page 2 of 2

TOTAL (if last page of this schedule)

984,99

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZONS TO RE-ELECT ROWLAND

Reset Form

SCHEDULE E	IN-KIND
(Rev. 06/97)	
	K THIS BOX IF

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
05/29/08	Vrcky I. Rowland Box 27 Clermot IA 5 2136	SELF	Ochum Pub Ac for Primary	\$ 125.76	
05/29/02			Ydhoo. Web Stre	2 485	
20103102			Half Genly to Pende	2793	
100 los los			Alco. Petrotre Decozarzon	39.43	
06/17/08			Cardy for Parel	, 32.57	
06\75(æ			Alco	10.65	
o)(08(08			Maritano Supplies	36.83	
08/01/08			Copy Popu	6.42	
8નો 180			Stoples frinks	9841	
જી ! ની&			Bullons	35.76	
			SUB-TOTAL TOTAL (if last page of this schedule)	\$ 443.11 \$ 4 43.11	V

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of _____ (for Schedule E)

COMMITTEE NAME (Must be same as on Statement of Organization)				
CITIZENS	70	RE-ELECT	ROWLAND	

SCHEDULE	
E	IN-KIND
(Rev. 06/97)	CONTRIBUTIONS
	K THIS BOX IF DING FORM

Reset Form

DATE					
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
80/11/180	Vicky I. Rowland BOX27 armont, IA 52131	SELF	BARGAON OWTHER MATLENG SUPPLIES	\$ 6.43	
03/09 los	_		Paper-INK	14642	
3 8 22 63			ychoo Web Site	3887	
हर्ग हार्ग			Tatlumena Plywoodfor Sign	57.04	
6/13/03		>	PAGNITUS STONS NE. TAKON	2835	
·					
SUB-TOTAL TOTAL (if last page of this schedule)				*7.66.59 *709.70	//

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of _____ (for Schedule E)